

Date Received 7/25/78Amt. Paid \$ 164.20

No.

Date Issued 7/10/78

TOWN OF ACTON

APPLICATION FOR PERMIT TO BUILD OR REMODEL

This application must be submitted not less than two weeks prior to the date of starting construction. Building plans must accompany all applications. A Registered Plot Plan for all detached buildings, and a Sketch indicating location of buildings for additions, must also be submitted.

The undersigned hereby applies for a permit to build, alter, or make additions according to the information filed herewith and the following:

1. Owner Michael J. Vecchione Address 67 Hammond St
2. Architect Address
3. Contractor Michael Inc Address Same
4. Use of building House
5. Estimated cost complete, including land 60,000
6. Type of Construction Wood
7. Location of building Lot B 43 Hammond St
No. Street

- a. If in recorded subdivision, give name
lot number B

8. Zone District

9. Lot dimensions:

- a. Frontage 200.00
- b. Depth 255.00
- c. Sq. ft. area 40,000
- d. Rear dimensions 205.84
- e. Distance to side 250.00
- f. Distance to rear 205.84
- g. Set back front

10. Description of Building Moving Across Model Home Down
RT 2 - to RT 27 to Newton Rd to Hammond St
without Roof on

Size of building 48 x 24
No. of bedrooms 3
No. of baths 2
Area for future rooms

Garage: Attached Under (Separate)

I hereby certify that the data given on this sheet is correct and that I will conform to all the applicable by-laws of the Town of Acton in erecting the building.

**PERMIT FEES ARE NONREFUNDABLE
EITHER IN PART OR WHOLE.**

Signature of Applicant

Address

**THIS PERMIT SHALL BE VOID
UNLESS CONSTRUCTION THERE-
UNDER IS COMMENCED WITHIN
NINETY DAYS AFTER THE DATE
HEREOF.**

Zoning approval

Sub-division approval

Approval of Board of Health: Date